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Web Site: [www.homemed.alabama.gov](http://www.homemed.alabama.gov)

### APPLICATION FOR CHANGE OF ADDRESS

**Instructions:**

- This form is to be completed for existing licensees who are requesting a change of address only.
- If additional changes such as equipment provided, FEIN or SSN, or disciplinary actions have ensued,



here. You will need to complete a new application instead.

- Once this completed form is received in the Board Office, you will be contacted by an Inspector for the Board to schedule your site inspection. The site inspection form and 21 Supplier Standards are published at [www.homemed.alabama.gov](http://www.homemed.alabama.gov) for your convenience.

Current License Number: \_\_\_\_\_

**Applicant Information**

**(Instructions: Please list below the new address and information)**

Legal Business Name: \_\_\_\_\_

(D.B.A., Trade, or Business Name)

Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ FAX: (\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Preferred Mailing Address (for mailing purposes only):

\_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

FEIN# or SS#: \_\_\_\_\_ Date Business Started: \_\_/\_\_/\_\_\_\_

Yes  No Are patient records stored at this location?

If "No", where are they kept?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Instructions: All business licenses and occupational licenses are required to reflect the new physical address. List all business and occupational licenses you hold below (i.e. city, county or state business license, pharmacy license if supplying oxygen, Elevator Permit if supplying stair lifts, Orthotics and Prosthetics License (if supplying custom made O & P):**

State/County/City	Type License	Date License Expires	Is the new address reflected on this license?
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

If additional space is needed, record on a separate sheet of paper and attach to this application.

**General Liability Insurance**

Instructions: General Liability Insurance Policy must reflect the new physical address.

Insurance Company Name: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Date Issued: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Agent Name: \_\_\_\_\_

Agent Phone #: \_\_\_\_\_ Agent FAX: \_\_\_\_\_

- I have attached a copy of all business and occupational licenses reflecting new address;
- I have attached a copy of certificate of coverage for general liability insurance (minimum of \$300,000) reflecting new address;
- I have attached \$275 for the Site Inspection Fee upon Change of Physical location.
- Location is ready for site inspection now  
OR  
Location will be ready for site inspection after \_\_\_/\_\_\_/\_\_\_\_.  
(licensees are to file a change of address notice 30 days prior or 30 days after move.)

**Affidavit of Applicant**

I, \_\_\_\_\_ acknowledge and state that all of the information supplied in this application is true and correct to the best of my knowledge, and that I have read and are familiar with the Rules and Regulations pertaining to the licensure of Home Medical Equipment in the State of Alabama. I acknowledge that any false or untrue statements or representation made in this application may result in the revocation or denial of any license to provide home medical equipment granted to me and/or criminal prosecution to the fullest extent of the law.

\_\_\_\_\_  
Person in Charge Signature

\_\_\_\_\_  
Date

**CITIZENSHIP** *This section to be completed in compliance with Ala. Code § 34-14A-7 and Ala. Code § 41-13-7.*

This section must be completed by the individual responsible in charge or if the responsible in charge is incorporation, limited Liability Company, or partnership by the responsible in charge.

1) Are you a citizen of the United States?

Yes     No    If "yes" please read the declaration below and sign.  
If "no," see question 2 below.

**PROVIDE PROOF BY SUBMITTING ONE OF THE ITEMS LISTED ON ATTACHMENT**

*I hereby declare that I am a citizen of the United States of America and, I sign this declaration under penalties of perjury; making a false, fictitious, or fraudulent statement or representation in this declaration is perjury in the second degree pursuant to Ala. Code § 13A-10-102.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

2) If you are not a citizen of the United States, are you an alien who is lawfully present in the United States of America?

Yes     No    If "yes" please read the declaration below and sign.

**PROVIDE PROOF BY SUBMITTING ONE OF THE ITEMS LISTED ON ATTACHMENT**

*I hereby declare that I am an alien lawfully present in the United States of America. I sign this declaration under penalties of perjury; making a false, fictitious, or fraudulent statement or representation in this declaration is perjury in the second degree pursuant to Ala. Code § 13A-10-102.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## **PROOF OF CITIZENSHIP**

*Code of Alabama 1975, Section 31-13-29(g)*

From Act 2012-491

1. A driver's license or nondriver's identification card issued by the Alabama Department of Public Safety or the equivalent governmental agency of another state within the United States, provided that the governmental agency of another state within the United States requires proof of lawful presence in the United States as a condition of issuance of the driver's license or nondriver's identification card.
2. A birth certification indicating birth in the United States or one of its territories.
3. Pertinent pages of a United States valid or expired passport identifying the person and the person's passport number, or the person's United States passport.
4. United States naturalization documents on the number of certificate of naturalization.
5. Other documents or methods of proof of United States citizenship issued by the federal government pursuant to the Immigration and Nationality Act of 1952, as amended.
6. Bureau of Indian Affairs card number, tribal treaty card number, or tribal enrollment number.
7. A consular report of birthday abroad of a citizen of the United States of America.
8. A certification of citizenship issued by the United States Citizenship and Immigration Services.
9. A certification of report of birth issued by the United States Department of State.
10. An American Indian card, with KIC classification, issued by the United States Department of Homeland Security.
11. Final adoption decree showing the person's name and United States birthplace.
12. An official United States military record of service showing the applicant's place of birth in the United States.
13. An extract from a United States hospital record of birth created at the time of the person's birth indicating the place of birth in the United States.
14. AL-Verify.
15. A valid Uniformed Services Privileges and Identification Card.
16. Any other form of identification that the Alabama Department of Revenue Authorizes, through administrative rule promulgated pursuant to the Alabama Administrative Procedure Act, to be used to demonstrate or confirm a person's United States citizenship or lawful presence in the United States, provided that the identification requires proof of lawful presence in the United States as a condition of issuance.

## **PROOF LAWFUL PRESENCE OF NON-CITIZEN**

*Code of Alabama 1975, Section 31-13-3-(10)*

1. A valid, unexpired Alabama driver's license.
2. A valid, unexpired Alabama nondriver's identification card.
3. A valid tribal enrollment card or other form of tribal identification bearing a photograph or other biometric identifier.
4. Any valid United States federal or state government issued identification document bearing a photograph or other biometric identifier, if issued by an entity that requires proof of lawful presence in the United States before issuance.
5. A foreign passport with an unexpired United States Visa and a corresponding stamp or notation by the United States Department of Homeland Security indicating the bearer's admission to the United States.
6. A foreign passport issued by a visa waiver country with the corresponding entry stamp and unexpired duration of stay annotation or an I-94W form by the United State Department of Homeland Security indicating the bearer's admission to the United States.